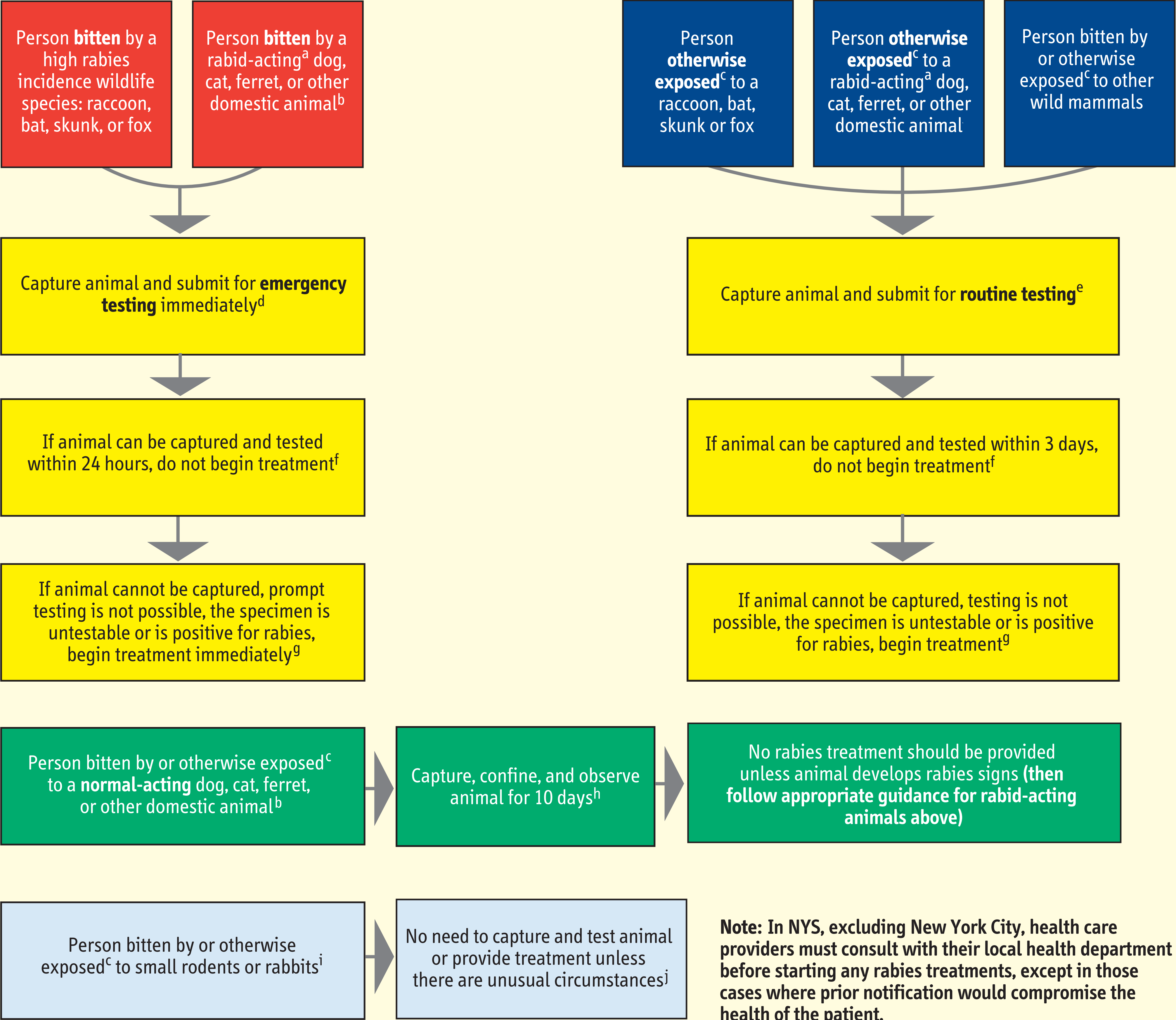


Rabies Treatment Algorithm



Footnotes For Rabies Treatment Algorithm

- a. Rabid-acting: a combination of neurologic signs, best interpreted by a veterinarian, including a change in or unusual behavior, extreme aggressiveness, paralysis, convulsions, excess salivation, difficulty eating or drinking, unusual vocalizations
- b. Domestic animals: horses, cattle, sheep, goats, and swine
- c. Otherwise exposed: see NYSDOH “Guidance Regarding Human Rabies Exposure and Treatment Decisions” and “Guidelines for Managing Bats and Risk of Rabies Transmission” for a complete definition of exposure; includes scratches or other fresh wounds or mucous membranes contaminated with the animal’s saliva; also includes a ‘reasonable probability’ of an undetected bite from a bat, as evidenced by direct skin contact with a bat, or a bat found in the room with a sleeping person, unattended child or person with mental impairment. [Guidelines available from local health departments or at www.health.state.ny.us/nysdoh/zooses/guide.htm].
- d. Emergency testing: requires phone consultation with county health department and NYSDOH Wadsworth Center Rabies Laboratory, 518-869-4527 during business hours, or off-hours 518-527-7369 or 518-527-7370; and requires driving specimen to the Rabies Laboratory at Griffin Laboratories, 5668 State Farm Rd. (Hwy 155 west of Rt. 20, Western Ave.), Guilderland, NY. For emergency non-workday tests, results will be available the same day, often as quickly as within several hours after the specimen is received at the lab.
- e. Routine testing: submission to NYSDOH Wadsworth Center Rabies Laboratory with appropriate lab submission form via overnight delivery service. See specimen submission guidelines on webpage: www.wadsworth.org/rabies or call 518-869-4527.
- f. If specimen is at the laboratory in the morning, results will be available that afternoon. **All efforts should be made for up to 3 days to capture and test animals when there has been a possibility of exposure, because most will be negative for rabies and will eliminate the need for rabies treatment.** Consideration should be given to reliable identification of the exposing animal in making decisions about need for rabies treatment.
- g. Rabies treatment should not be started when animal capture, confinement, euthanasia, specimen shipment, or testing is in process to determine the rabies status of the animal, unless it is a high-risk head wound and the animal has a high probability of being rabid.
- h. Except for those previously vaccinated, rabies treatments include (1) 1.0 mL doses of vaccine administered IM in the deltoid area on days 0, 3, 7, 14, and 28; and (2) rabies immune globulin (RIG). **To avoid treatment failure, all the RIG must be infiltrated into and around the wounds** [20 IU/kg body weight; calculation formula: #cc=(weight in lbs x 9.09)/150]. If not feasible due to the wound site, a mucous membrane exposure, or unknown exposure site in ‘reasonable probability’ bat exposures, administer RIG IM at a site distant from vaccine administration (e.g., deltoid of opposite arm from one receiving vaccine). Those with certain types of previous rabies immunization should receive treatment consisting of vaccine only, given on days 0 and 3. For details on appropriate treatment regimens see NYSDOH guidelines listed in footnote c and the federal guidance document “Human Rabies Prevention--United States, 1999: Recommendations of the Advisory Committee on Immunization Practices (ACIP)” [available from local health departments or at www.health.state.ny.us/nysdoh/zooses/guide.htm].
- i. Capture, confine, and observe animal for 10 days: All efforts should be made for up to 3 days to capture the animal and place it under a 10-day confinement and observation for rabies signs. If the animal is observed to be symptom-free during the 10-day confinement, it did not have rabies virus in its saliva at the time of exposure, and no human rabies treatment is needed. If the animal is not up-to-date on its rabies vaccinations, confinement must be done in an appropriate facility (veterinary office, kennel, shelter). Due to high rabies incidence in NYS, rabies treatments are commonly considered in NYS when the animal is not tested or is not observed to be healthy for 10 days, although additional factors may be evaluated, including animal behavior, species-specific incidence, circumstances of exposure, sightings of a healthy but uncaptured animal during the 10-day period, etc.
- j. Small rodents (mice, rats, guinea pigs, hamsters, gerbils, squirrels, chipmunks, moles, voles) and wild rabbits have rarely been found rabid in NYS, so they should not be submitted for testing unless there are unusual circumstances and there is consultation with the Rabies Laboratory. Similarly, persons should not be provided rabies treatments for exposures unless there are unusual circumstances and there is consultation with the local health authority.
- k. Unusual circumstances: If there has been a bite from a small rodent or rabbit, the animal is available for testing, and there is considerable concern about the incident and/or the animal has been acting rabid, the animal may be submitted for routine rabies testing. Both in NY and elsewhere, pet rabbits and small rodents caged or allowed to roam outside have, in rare circumstances, developed rabies (probably because the cage protected them from more serious wounds that would have led to their deaths). This information should be provided to the bite victims and considered when reaching a decision about testing the animal.